

See pages 11 to 10
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much on importance

• AN ADDRESS *L.S.G.*
of State Sanitary Measures

DELIVERED BEFORE THE

MEDICAL SOCIETY OF THE STATE OF
PENNSYLVANIA,

BY

HENRY H. SMITH, A.M., M.D.U.P.,

PRESIDENT OF THE SOCIETY,

At its Annual Meeting held at Philadelphia, May, 1884.

REPRINTED FROM ITS TRANSACTIONS.



PHILADELPHIA:
COLLINS, PRINTER, 705 JAYNE STREET.
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ADDRESS.

MEMBERS OF THE MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA,
AND LADIES AND GENTLEMEN:—

THE recurrence of the period, when delegates from all our County Medical Societies assemble to interchange professional opinions and renew or form the fraternal ties of a distinguished brotherhood, has again brought us together on this the thirty-fifth annual session of the Medical Society of the State of Pennsylvania.

Welcomed as you have been by our Committee of Arrangements on behalf of the *Philadelphia County Medical Society*, honored by the presence of the Governor of the commonwealth, and coming among those who have been the preceptors of many of you, in our well-known medical schools, you hardly need the greeting I tender you this evening, on behalf of our citizens here assembled, in recognition of your presence in Philadelphia.

Chosen to preside over your deliberations, I highly appreciate the unsought honor conferred by your choice, and have entered on the performance of the duties this honor entails, with a consciousness that I am dependent on your kind assistance for the proper execution of the functions of the Chair.

The by-laws of our Society make it incumbent on your President to deliver a public address, and in the performance of this duty, I ask your consideration of a theme with which you are all doubtless more or less familiar, but which now and evermore must be the subject illustrated in these annual assemblies.

This theme I would formulate as—

THE IMPORTANCE AND USEFULNESS OF SCIENTIFIC MEDICAL ORGANIZATIONS TO OUR PROFESSION AND THE PUBLIC.

In order correctly to comprehend the objects obtainable by such organizations, it may be useful—

- 1st. To note their origin and elementary formation, as described in history.
- 2d. Show in what manner our annual meetings are useful to the profession and the public.
- 3d. Allude to the reciprocal obligations of the public to the profession.

A *Society* has been defined as “an association of individuals voluntarily created for the promotion of knowledge, industry, or virtue, and of planning or creating orders for these purposes.” It is especially constituted for the *extension* of knowledge and the general good of the community in which it exists.

The creation of societies is due to comparatively modern periods in the history of mankind, and is evidence of the progress of civilization and literary culture, Alcuin, about 781, under the patronage of the Emperor Charlemagne, being, it is said, the first who attempted to organize one.

The earliest literary society was called an academy, and derived its name from *Academus*, the original owner of the grove in the suburbs of Athens, where Plato and his followers held their philosophical meetings.

Cicero, also named his villa, near Puzzuoli, an academy, and is said to have there written his “Academical Questions” and his book “*De Natura Deorum*.” Subsequently the term academy signified “a society of learned men established for the improvement of art or science,” as in the Royal Academy of Science in Paris and our own Academy of Natural Sciences in Philadelphia.

A medical academy or society, designated as that of the “*Naturæ Curiosæ*,” existed at an early period in Germany; another was founded at Palermo, in 1645, and another met weekly at Venice, in 1701.

The Academy de *Naturæ Curiosæ*, or the Leopoldine Academy, was founded by Bauschius, a physician, in 1652. He extended an invitation to all physicians to communicate their extraordinary cases, which, in 1684, were published as a volume of observations,

under the title of *Ephemerides*, a title in existence in a journal of the present day.

The most enlarged idea of a literary and scientific society is, however, believed to have originated with Sir Francis Bacon, in England, "who recommended to James the First the institution of societies of learned men, who should give to the public from time to time a regular account of their researches and discoveries, and thus unite the *world* into one great republic of letters, which, though consisting of many detached states, should yet hold a strict union and preserve a mutual relation to each other in everything that regarded the common interest." In his "*New Atlanta*" he delineated a philosophical society, which Cowley is said to have presented to Charles the Second of England, for the charter of the Royal Society of London, and it may interest some to know that Dr. Wm. Harvey, the discoverer of the circulation of the blood, was, in 1628, physician to Lord Chancellor Francis Bacon,¹ and doubtless participated in the planning of this Society.

History has thus demonstrated the utility of such organizations, and that many improvements of a public character have been due to the united labor and intelligence of men interested in one grand pursuit.

The charter of "the Royal Society of London" was granted in 1662; that of "Christian Knowledge" in 1698, and that of "The British Medical Association" in 1832.

The New Jersey Medical Society appears to have been the first medical society organized in this country, it being regularly constituted by the voluntary association of a number of the Practitioners of Physic and Surgery of East New Jersey, at New Brunswick, on July 23, 1766, "for their mutual improvement, the advancement of the profession, and the promotion of the public good."²

The American Academy of Sciences was established in 1780, by the Council and House of Representatives of Massachusetts, "for encouraging medical and philosophical discoveries and whatever tended to advance the interests, honor, and dignity of a free, independent, and virtuous people."³

The organization in 1847 of the American Medical Association,

¹ *Encyclopedia Britannica*, etc.

² Narrative of the rise and establishment of the New Jersey Medical Society. Transactions from 1766 to 1859.

³ Dobson's *Encyclopedia*.

of which our State Society is an integral portion, is precisely that which Lord Bacon esteemed so advantageous to the general welfare, it being in fact a great republic of medicine in which individual State societies are united in a common interest, viz., the preventing, curing, or alleviating the "ills that flesh is heir to."

In the association of individuals that thus formed societies, it soon became apparent that some laws or rules of action applicable to each and every member must be adopted, in order to regulate intercourse and restrict irregular or individual opposition to the interests of the society, and that in these laws, as in those of all communities, the most important portion would be "the penal or vindictory clause," it being useless to say, do this or avoid that, unless the law also declared what would be the penalty or consequence of non-compliance. Ethics, or the law of manners, collected in a paper-book, termed Codex or Code, was thus adopted at an early period in the history of all societies, and the Code of Ethics of the American Medical Association is but another illustration "that history repeats itself."

In this code, the vindictory or penal clause is found in the by-laws, and as the code is accepted by each society, it is applicable to every one who is elected to membership in a State or County society. In the ninth by-law of the American Medical Association the rule explicitly states that "no State, local society or other organized institution, shall be entitled to representation in the Association that has not adopted this Code of Ethics, or that has intentionally violated or disregarded any article or clause of the same."¹ Consequently, the penalty of violation is exclusion and loss of membership, which also implies non-intercourse professionally with other members.

The origin of our own State Society dates back only to the year 1848, when the pre-existing county societies of Chester, Philadelphia, and Lancaster elected delegates to a Medical State Convention that assembled in the city of Lancaster, to take the necessary steps to create a State Society such as was required to form a part of the American Medical Association. With this object, the Philadelphia County Medical Society, on February 5th, 1848, elected as delegates to the Convention, Drs. Emerson, John Bell, B. H. Coates, George W. Norris, Henry H. Smith, Rutter, Shallcross, Henry

¹ Article IX., Section II. By-laws of American Medical Association.

Bond, J. Rodman Paul, and Isaac Parrish;¹ of whom the speaker alone remains an active member of this Society.

The proposition for the meeting of the Convention originated with the Chester County Medical Society; whilst the Lancaster County Society tendered the first invitation for its assembling in Lancaster. At this meeting, on April 11, 1848, in the Methodist Church of that city, the daily newspaper, called "The Lancaster County Farmer," greatly aided the objects of the meeting by reporting its proceedings. The delegates to the Convention from the Lancaster County Society were: Drs. J. L. Atlee, Humes, Kerfoot, Duffield, Clarkson, and Emerson; and of these, our venerable fellow-member, Dr. Atlee, yet continues his active interest in our Society, the formation of which he greatly promoted by his professional influence, whilst illustrating the pleasures arising from the social intercourse of its members by a handsome evening entertainment at his own residence.

In its progressive development this Society, like all others, adopted as an integral portion of its constitution the Code of Ethics published by the American Medical Association, and again acknowledges its high estimate of the "old Code," and the incalculable benefits it has bestowed on the profession and the public.

This Code, now so widely recognized as an exponent of many professional obligations, was reported by the late Dr. Isaac Hays² (on behalf of a committee) to the National Convention that formed the Association, and was composed chiefly from a great number of Codes of the pre-existing county and state societies in the United States, as well as from the "Code of Institutes and Precepts," prepared by Dr. Thomas Percival, of Manchester, England, that was published in 1803. The adoption, by the Association, of a series of rules for professional conduct which thus had the approval of the most eminent physicians of that period, and some of the sections of which were in the words of our distinguished citizen, Dr. Benjamin Rush,³ may be cited as among the first fruits of the organization of the medical profession in the United States, and illustrates, as Lord Bacon suggested, "the good derivable from an association of kindred spirits in the formation of a society," as well as the truth of our national motto, that "in union there is strength."

At a period when rebellion to the regularly constituted authority

¹ Philadelphia Medical Examiner, 1848.

² Prefatory Note to original Code, printed in 1848.

³ Ibid.

of the profession, as organized in this country, is attracting even the attention of the daily press, it cannot be useless to recall the history and provisions of this Code, and to remind those who are now objecting to its beneficent laws, and endeavoring to substitute their individual sentiments for those of the profession regularly assembled and organized for the creation of an association in which they openly united, that they are risking the severance of professional connections that calmer consideration may hereafter cause them deeply to regret. If the progress of time and the wishes of a majority of the profession demand a modification of this Code, it should be accomplished in and by the association that originated it, and not by any county or State organization that with extraordinary selfishness ignores the sentiments of their brethren in other States.

A question that has been warmly discussed in connection with this Code is the right of members of the American Medical Association or of a county society to consult at the bedside or office in regard to the diagnosis and treatment of disease with those who practise and believe in an exclusive dogma, and especially that one revived by Hahnemann, of *similia similibus curantur*, or that "like cures like."

It matters little, in the consideration of this question, to ask how or why it arose. The propriety of such consultations is positively settled by the Code, and hence its repeal is advocated by that comparatively small number, especially in New York, who perhaps anticipate benefit from the change. Any one who reads the clause in reference to consultations will readily see that the Code recognizes the fact that two physicians, of different medical creeds, cannot agree on any question of pathology and therapeutics, when each is conscientious in the correctness of his own professional opinion.

Two minds, firm in a different belief, can seldom be led to agree; for, as Locke says, "we cannot imagine that those who hold to tenets differing from one another, and entirely contradictory to each other, could knowingly impose upon themselves, and accept truths offered by reason."

When, then, two such minds meet in consultation in a case of disease, how useless is it to expect harmony of sentiment or sound judgment! Can such consultations promote the interests of a patient? If human life has a value, it should be weighed in the balance of experience; and the experience of the regular, old school,

scientific physician goes back to the earliest records of the human race, and far antedates the origin of Christianity.

It is senseless clamor that calls this upholding of the sound education and high standing of our profession a "medical conspiracy," or "a medical trade union," as has been done by some of the opponents of our Code.

The cry of "trade union" thus raised is misapplied, and deceives no one. When an association of the most eminent and best educated physicians in the United States adopted our Code of Ethics the wording of it showed their estimate of professional duty, and the watchful care of the sanitary interests of each community. A high-toned and wide benevolence characterizes the entire work. There is no evidence in it of the advancement of any interest except that of humanity. The idea of money or money making, which is very properly the great and first object of all trade and every handicraft, has no existence in the Code of the American Medical Association. Its sole aim is the welfare of society, and one of the most prominent objects of the Association is the warding off, by sanitary study and discussion, the development of diseased action; an action that, when once established in a community, would be the greatest source of emolument that the profession could possess.

Money and its acquisition is the last thought of every scientific physician. It is the first, last, and ever-enduring sentiment of trade, and, as I have just said, properly so, as it is by the revenue derived from trade that governments are maintained, and benevolent and religious institutions supported; but the laws regulating trade differ widely from those which control our profession. Trade frequently does not hesitate to deceive; hence the legal maxim, "caveat emptor," let the buyer beware; and we have another illustration of this in the common proverb, "there is no friendship in trade." On the contrary, there is no more marked example of friendship, and the implicit faith evident in the dealings of two men, than that often seen in the confidence bestowed by a patient in the judgment and honesty of purpose of his physician. How rare it is to find one who hesitates to obey, without doubt or apprehension, any order that is given him by his physician! It may be that he is directed to swallow the most dangerous of poisons, or the most harmless of pills; but be it one or the other, the prescription is taken with the most unreserved faith in the honesty of purpose of him who orders it, because the patient is confident that his medi-

cal attendant thinks only of his relief from suffering or the preservation of his life, and human confidence can go no further between man and man.

Where can be found a more beautiful illustration of faith in man or of the kind offices of the practice of medicine, and "its influence in blessing the lives of men," than is daily exhibited in the intercourse of the household with the old and oft-tried family physician? With what perfect trust and innocence does the mother confide to his ear and judgment her fears in reference to the health of a beloved daughter! How often is he first consulted on the proposed matrimonial alliance that involves that daughter's health and happiness! How often is he the sole confidant of the earliest anxieties of maternity! With what entire trust does the husband and father leave his sick wife and child for the urgent cares of the counting-house and confide all that is most dear to him, to his family physician! And it redounds to the honor of the profession that such a trust is very rarely misplaced; and though "It is a busy talking world, that with licentious breath blows like the wind as freely on the palace as the cottage,"¹ yet suspicion rarely snatches the fair fame of the physician, and when it does, unless most clearly proven, "Meets no regard from noble minds, Only the *base* believe what the *base* only utter."² Give all the credit justly due to the marked examples of the assurances of a religious faith, and I am far from doubting it in any one, yet it does not surpass the unbounded reliance reposed by many in the physician, whose judgment, experience, and honesty of purpose the trials of life make to shine only more brightly.

Can trade show anything that will equal this daily recurring evidence of trust in the profession? No, gentlemen; let us not be disturbed by this partisan cry of "medical trade union."

Conscious of the correctness of a system of medicine that has stood the crucial test of centuries; firm in the rectitude of a vocation that recognizes no motive for action in its Code of Ethics but that of "good-will to men," let us stand fast in our faith, shoulder to shoulder, in the serried ranks of the renowned corps of the American Medical Association, and the discontented spirits who oppose our Code will be driven back by the stern condemnation of the majority of the profession as waves from a rock-bound coast.

¹ Rowe's Fair Penitent.

² Beller's Injured Innocence.

UTILITY OF THESE ANNUAL MEETINGS TO THE PROFESSION AND
THE PUBLIC.

The influence exercised by these annual meetings of our Society is, however, by no means limited to medical ethics, but extends to the entire community, through the scientific work thus accomplished.

In reviewing all that this Society has done in the last thirty-five years, our increased knowledge of the best means of preventing or alleviating disease is very apparent.

No Post-graduate course of medical instruction, now so much in vogue, "with doctrines fashioned to the varying hour," offers more valuable information to a medical man than that afforded by the papers and discussions presented in our sessions. The great difficulty at present is to condense the large amount of valuable material annually presented: and he who would not be left behind in the improvements of his profession cannot safely neglect attendance on these meetings or fail to read our printed "Transactions."

Since 1848 many advances in pathology as well as in practice have been made in this body and been subsequently developed for the public good.

In the annual addresses of the chairmen of the Sections on "The Practice of Medicine," "Surgery," "Obstetrics," and "Hygiene" how much valuable information has been laboriously gathered by their respective authors, tested by their ripe experience, and freely offered to the profession and the public in the most attractive and scholarly manner, presenting facts not readily obtainable by those educated sons of toil, the hard-worked, badly paid, and ever-busy country practitioners: as well as by their more favored brethren in our cities, whose constant occupations leave but a brief hour to read up the improvements presented each day by a prolific press!

In the annual reports made by the able chairman of the Section on Hygiene, and especially by him who has also for years faithfully served the Society in the care of its funds, how many suggestions have tended to secure the comfort and sanitary safety of many of the towns and villages of this great Commonwealth!

In 1875, in inaugurating these reports on Hygiene, the chairman² aptly described "the absolute necessity of corporeal sanity to

¹ Goldsmith.

² Dr. Benjamin Lee, of Philadelphia.

the existence of mental sanity," recognizing the great truth that the preservation of health implies the prevention of disease, and illustrating the ancient proverb, "*mens sana in corpore sano*," as well as the wisdom of Hippocrates, who, nearly twenty-five hundred years before him, first enunciated the principles of Public Hygiene in his treatise *Περὶ αἰσθῶν: ὑδάτων καὶ τόπων*: air, water, and localities, principles yet carefully studied by our profession for the especial benefit of every community, thus realizing the truth of the anecdote of the Scotch doctor, who, being called on at a supper for a toast, gave "the health of this company, though very much agin my interest."

How much of the attention now given by laymen to the purity of the water they drink, the vitiation of the air they breathe, the importance of proper drainage, and the removal of excreta are due to the assembling of our various medical societies!

Although, perhaps, the public mind has become too much excited on the subject of drainage, and although there are some persons who see the spectre of death hiding in every closet, and typhoid fever in every inlet or standing wash-basin or tub, there can be no question that much valuable information has been retained from reading medical treatises on these subjects.

If the swing of the pendulum of scientific discussion has at first gone too far, it will eventually settle down to a regular, gentle beat of systematic attention to the general laws of health; and the unscientific and popular use of the word "malaria," literally bad air, for every headache or backache, will be brought within proper bounds and regarded as expressive of a cause, and not of a disease.

It is to be regretted that correct opinions of the importance of pure air in all dwellings, and especially in sleeping rooms, could not be as widespread as the present erroneous idea of malaria.

The fear of "taking cold," and suffering from exposure to fresh air, is one constantly brought to the notice of every physician. Whilst apprehensive of "taking cold," the public seldom recognizes the danger of being too hot, or of living in a temperature that often exceeds 75° Fahrenheit, in which every aperture for the entrance of the fresh air, that is so essential to the health of a respiratory creature like man, is carefully closed.

When Dr. Kane's command was in the Arctic regions, "they slept in seal-skin sacks, and were clothed in furs which preserved their bodily heat whilst they breathed an atmosphere that varied

from 30° to 70° below zero.”¹ During this period they continued well and had no catarrhs: but I am informed by a member of the party now residing in Philadelphia,² that, as soon as the command got within the four walls of a house and the so-called comforts of a dwelling at Upernavik, they all suffered from oppressed respiration, a sense of suffocation, and the ordinary symptoms of catarrh of the chest.

Not only is there with many an ancient and popular dread of fresh air, but the evil influence of fresh *night* air is yet widely noticeable. Many, who admit to some extent the beneficial influence of fresh air during the day, will hesitate about breathing the same air after sunset, a prejudice of ancient date. Thus, Shakespeare makes Portia say to Brutus, when complaining of his being so much with the conspirators in his garden at night, “Wilt dare the vile contagion of the night and tempt the rheumy, unpurged air, to add to sickness?”³

Now, science has never demonstrated the injurious influence of night air over that of the day, unless in its diminished temperature or increased moisture, and this can be readily guarded against by proper clothing.

Among the varied papers read in our meetings of marked public interest, and indirectly connected with the fresh-air question, was one “On the Influence of Growing Plants on Lung Diseases,”⁴ which those present at our last session can readily recall.

In this paper attention was called to the amount of aqueous vapor exhaled or transpired by growing plants, the rate being carefully calculated at one and one-quarter ounces by weight from every square foot of leaf surface, during twelve diurnal hours, thus preventing the very dry atmosphere so often found in the sick chamber. The experiments there stated also render it probable that Ozone is generated by *flowering* plants, thus rendering them an active disinfecting agent. From personal observation of florists and gardeners threatened with consumption, the author of the paper says, “he is convinced that their health was greatly benefited by the influence of plant life and the temperature and atmosphere of green-houses” (not hot-houses). This subject may prove not only attractive from

¹ Arctic Explorations, vol. ii. p. 294, 1856.

² Mr. Amos Bonsall.

³ Julius Cæsar.

⁴ Transactions Med. Soc. Pa., vol. xv. p. 318, 1883, by J. M. Anders, M.D., Philadelphia.

its novelty, even if further experience fails to prove its entire correctness, but it will also interest many from the pleasure attainable from plant surroundings, whilst testing their utility as a sanitary measure.

Popular sentiment has for a long period been entirely different from this, and many who are well read, yet regard the presence of plants in a chamber as injurious to health, from the supposed amount of carbonic acid gas given off by them at night.

It has, however, been recently demonstrated by Prof. Kedzie, of the Michigan Agricultural College, that this opinion is hardly correct, or only to so slight a degree as to make the result harmless. In order to test this question as perfectly as possible Prof. Kedzie took the air from the College Green House, that contained more than 6000 growing plants, in a room that had been carefully closed more than twelve hours, and in 3 specimens of the air, gathered shortly *before* sunrise, from the different parts of the house, analysis showed only 4.11, 4.00, and a second time 4.00 parts of carbonic acid gas in 10,000 parts of air, or an average of 4.03 in 10,000 ; whilst the so-called *pure* air outside the house contained 4 parts in the 10,000 ; thus demonstrating, beyond all question, the fact that growing plants have *no* deleterious influence on the air we breathe.

From the annual meetings of our Society have also arisen many legal acts relating to the protection and preservation of some of the most valuable interests of the community—acts, it is true, only gained from our Legislature by persistent efforts. In the Act for the Registration of Births, Marriages, and Deaths, now in general use in Philadelphia, how valuable a record is secured in tracing relationship or recovering property for otherwise unknown heirs !

The law requiring every physician to be registered by the prothonotary of his county, and the exhibition of his diploma before he can be allowed to practise medicine or issue a single prescription, has worked much good to the community, but it yet requires increased power. In those States that can enforce a thorough law it has driven away many of the harpies that, under the pretence of curing disease, preyed upon the credulous.¹

¹ A marked example, for which I am indebted to the able Secretary of the State Board of Health of West Virginia,* illustrates so well the beneficial action of such laws that I think its relation may serve for our instruction as

* Dr. Jas. E. Reeves, of Wheeling.

The creation by *our* Legislature of a State Board of Health, whose duty it shall be to supervise and recommend such measures of drainage, water-supply, etc. as will promote health and ward off disease, is a question that has often been discussed in this Society. During the past ten years this object has been strongly urged by

well as that of the public for whom we are seeking a similar enactment in Pennsylvania.

A man, professing to hold a diploma from the University of Edinburgh, Scotland, issued flaming posters and pages of advertisements that he would lecture for six nights in Wheeling, at the Academy of Music, and give private consultations to patients; exhibiting in the window of a jewelry store a gold-headed cane set with diamonds, valued at \$3500, as an example of the appreciation of his medical skill by a distinguished and grateful patient. When the Secretary of the State Board of Health in Wheeling heard of him, he called and demanded his compliance with the law regulating the practice of medicine in Western Virginia, viz., registration by the prothonotary and the payment of fifty dollars special tax as an itinerant physician. After various excuses he paid the sheriff the special tax, but was unable to find his diploma. In a few days he found the atmosphere of Wheeling did not suit him, and quietly withdrew in time to escape arrest and imprisonment. His "Health and Home Journal" was a vile paper that would have defiled many homes by its circulation, suggesting in plain words the most vicious practices. From Wheeling he travelled to Toledo, Ohio, where, in company with another quack, he was arrested on the affidavit of citizens for uttering and distributing obscene literature in a monthly called "Health and Home." Under the statutes of Ohio, both were arrested and put under \$700 bail for trial, the penalty of conviction being a fine of \$1000 and six months' imprisonment.* After jumping his bail and escaping from Toledo, he went to Cleveland soon after the American Medical Association left there. Here he was also arrested, giving up a diamond pin, etc., as security for his appearance. He lectured that night at Froshem Hall to 150 people, and the next day was arraigned in the police court. Forfeiting his bail again, he was subsequently found concealed in Cleveland, claimed by Toledo officers, and hurried back to Toledo on the charge of using the mails for obscene literature. Up to this time he had lost as forfeited bail \$400 in money, a diamond cluster pin, and a gold watch that he had deposited with the police clerk as his security. An attempt was made by a lawyer to set aside the forfeiture of his bail-bond, but the judge refused the motion. Again, in September, 1883, a long-haired mountebank, calling himself Dr. Johnson, appeared on the streets of Wheeling selling a patent "cure-all." After the Secretary of the State Board of Health saw him prescribe for a patient, a warrant was issued for his arrest. On the pretence of going to his hotel for his diploma, he fled the town and State that were protected by the regulations of such a State Board of Health.†

* Wheeling News Letter, June 17th, 1883, and Wheeling Register, June 23d and 28th, 1883.

† Wheeling Register, Sept. 12th, 1883.

many of our most valuable and energetic members, who have freely given their time and money to secure a proper law for this purpose.

Although they have repeatedly failed in convincing our law-makers of the importance of such a bill for the public good, may we not hope that, like the mythical Antæus, they will receive new strength each time they are cast down on the Legislative grounds? The cause of these repeated failures is variously explained; but the main reason is that suggested by our Committee on Medical Legislation, viz., the ignorance of our people in regard to the importance and utility of such a law.

The organization by this Society of the proposed "Pennsylvania Association to secure a State Board of Health" will probably do much towards creating judicious public sentiment. Let each County Society make arrangements to hold several meetings or citizens before the next session of the Legislature, at which brief papers may be read by its members, and speeches made by the local lawyers, divines, and prominent candidates for public office; or let special speakers be invited from other sections to address a meeting for such a purpose, and the public will soon become aware of the necessity of a State Board of Health to protect their own interests. Let each County Society urge the introduction into their schools of instruction in the elements of Human Physiology, and each child will soon introduce the subject of the lesson to each family, and knowledge will be extended. Let health tracts be widely distributed through every avenue of trade or travel. Let the masses be made to understand by these means, and especially by public meetings, that it is *their* welfare that is sought, and not that of the medical profession, and *they* will influence the candidates for office. The Latin proverb says, "*Docendo disces*"—by teaching others you are taught; and as he who teaches also learns, he will probably be the more impressed with the importance of legislative action for a State Board of Health.

Teach every one the importance of a Board to regulate such general sanitary measures as the heating and ventilating of large buildings, especially factories, public halls, and schools; the proper means of removing excreta; the prevention of the spread of small-pox, scarlet fever, diphtheria, whooping-cough, etc., so that children and others residing in infected localities shall not be allowed to attend funerals, come to schools, or otherwise be brought in contact with those who are well. Let there be an inspection and regu-

lation of vaccine farms, now that competition is rendering bovine virus in some instances dangerous. Let there be such an inspection of food and medicines, particularly the "artificial foods" of infants, as is given every sailor and soldier by our government laboratory at Washington. Let the farmer especially be made to realize that it would be the duty of a State Board of Health to protect his stock against the extension of hoof and mouth disease; pleuro-pneumonia; glanders, or hog and chicken cholera. Let every one be taught that the object of such a law is the appointment by the Governor, with the sanction of the legislature, of such a capable board, not all physicians, but containing lawyers, sanitary engineers, and other citizens, as may be proved by the nominations of organized scientific institutions or local boards of health to be capable of executing this important trust. In the interval that elapses before the next session of our legislature, the mere circulation of such information would do much to create a sound popular sentiment on this question, especially if our collegiate faculties and school-teachers are invited to aid us in instructing all in the laws of hygiene and the necessity of enforcing them by legal statutes.

The wording of such a bill as might become a proper law is a matter demanding very careful consideration. In drawing it, as has been well shown by Dr. Foster Pratt, of Michigan,¹ "experience teaches the importance of carefully determining in advance what and how much power you can induce your legislature to grant."

"The practical question," says Dr. Pratt, "in the beginning of such attempted legislation, is not so much what you would like to have, as what you can get. It is easy to defeat a measure by asking too much." Experience also shows, according to Dr. Pratt, "that you are sure to defeat your movement by asking for legislation that recognizes only *regular* physicians."

"Those of us who are sincerely and unselfishly desirous of promoting the sanitary interests of the public cannot too soon, nor too fully, recognize one fundamental fact, that under our form of government, a *State Medicine*, direct or implied, is as impossible as a *State Religion*, and that all denominations of practice, like all denominations of religious belief are and must be equal before the law." The judicial council of the American Medical Association

¹ MS. of Dr. Pratt.

have also decided "that in questions of legislation and governmental policy, on which every physician as well as citizen must be allowed full liberty of opinion and expression, a conference with homœopathic or irregular practitioners is not a consultation at the bedside as contemplated in the Code of Ethics."¹

Dr. Pratt's experience and success in obtaining legislation on this question, and his study of the subject in various States, make his opinion very valuable, and I commend it to your careful consideration.

The failure hitherto to obtain from Harrisburg such legislation as we unselfishly ask should not dishearten any one. Let us rather say, in the classical words of Cicero,² adapted to this occasion:—

*"Quousque tandem abutere patientia nostra, Catilina?
Quamdiu etiam iste tuus furor eludet nos?"*

"How long (O Legislators) will you abuse our patience?
How long will your (narrow-mindedness) continue to mock us?"

"O tempora, O mores!" Shame on the age that thus permits you to slight the requirements of science for the protection of the health and lives of our fellow-citizens!

It may not be inappropriate, in connection with the subject of State Medicine, also to call attention to the propriety of memorializing the legislature to modify the present mode of Capital punishment and make it correspond with the scientific progress of the age.

Without discussing the necessity of such punishment, we may justly urge that, as its main object is the removal from society of those whose lives are detrimental to its best interests, this should be accomplished in the least painful manner, and it does seem as if death by means of Electricity should at present receive due consideration.

It has frequently happened in the incautious handling of wires, connected with electric lights, etc., that instantaneous loss of life has ensued, and it is not surprising that the inventive genius of our people should have already suggested the application of electricity to executions.

¹ Transactions American Medical Association, vol. xxviii. 1877, page 60.
"Minutes of Judicial Council."

² First Oration against Catiline.

I feel therefore that I advance the cause of humanity when I direct attention to this subject with a view of obtaining legislative sanction.

The history of the invention is as follows:—¹

“Mr. H. B. Sheridan, of New York, applied last year for a patent on what he termed ‘An improved devise for executing criminals condemned to death,’ and proposed to assign the right to use his invention to the United States Government.

“His apparatus, he says, causes instantaneous death, without pain to the criminal and without disfiguring his body.

“It consists of an ordinary Arm Chair, with legs containing some substance that will *insulate* the body of the chair from the floor. The arms end in two brass knobs on which the hands of the criminal will rest, and the chair has a foot-rest in which is fitted a brass plate. The back of the chair is as high as a man’s shoulders. At the top is a small knob with a hole for a peg. The *positive* wire of a dynamo-electric machine, running up the back of the chair, ends in the knob. The *negative* wire runs to a resistance coil under the chair and thence to a brass plate in the foot-rest. Another *positive* wire runs to one of the brass knobs on the arms of the chair, and a second *negative* wire to the other knob. These wires can be connected with a dynamo-machine, miles away, by conducting wires.

“The Chair may be used in two different ways, as the two sets of wires are not operated together.

“If the foot-rest wire is used, some previous preparation is needed, and a small silken collar is fitted tightly on the neck of the criminal. This has on the inside, at the back, a small brass button which fits closely against the spinal process. This is connected with a small silk cable which hangs down loosely and ends in a brass peg. This collar being put on the criminal in his cell, he is then brought out in his bare feet and seated in the chair. Straps fasten his arms to the arms of the chair, and his legs to the chair legs. The brass peg of the silk cable is inserted in the hole on the brass knob at the back of the chair, and is there held by a screw. The bare feet of the criminal rest on the brass plate of the foot-rest, and the circuit would now be complete were it not that the positive wire is broken at a short distance from the chair, but connection can be at

¹ Philadelphia Evening Telegraph, May, 1883.

once established by turning a switch or pressing a button. When this is done the full charge of electricity enters the criminal's body at the spinal cord and passes out at his feet, the resistance coil which it meets under the chair increasing its force and preventing it from injuring the dynamo-machine on its return: the criminal being killed instantaneously and without pain, as the electricity acts much more rapidly than the nerves of sensation.

"The second method of using the chair is to discharge the current into the palms of the hands through the large brass knobs. In this case no collar is needed, and the criminal need not be barefooted. In either case all the wires and apparatus excepting the small collar would be out of sight, and the criminal would see nothing but an ordinary chair. The sheriff can signal the executioner to turn the switch or he can press a button on the floor, and in a second all would be over."

Mr. Sheridan says he does not wish to make money out of this machine, but has invented it solely in the interest of humanity, and thinks there is no possibility of its failing to do its work quickly and well. Should his suggestion recommend itself to the approval of the Society, it remains for you to urge the passage of such a law as will justify its use as a substitute for hanging.

In reverting to the work done by our Society, and comparing the present with the former condition of the profession, it is instructive to note, that whilst the great aim of the Society is yet the improved treatment of disease, and the elevation of the standard required for a medical diploma, our opinion of what is most feasible in the latter is the fruit "of the association of kindred spirits in the development of one great purpose."

Our views as to the best means of instruction have greatly changed within a few years. In 1834, a medical education in our best colleges was thought to be attainable in two courses of didactic lectures of about sixteen weeks, and in these lectures the professor often exhibited not only his medical but also his literary culture, by quotations from Shakespeare and other writers, and there are some present this evening who can recall the lectures on fever of a distinguished professor in the University of Pennsylvania, who illustrated the condition of the patient during a chill, by quoting Cassius's invective against Julius Caesar, which he slowly enunciated in this manner.

"He had a fever when he was in Spain,

"And, when the fit was on him, I did mark how he did *shake* :

" 'Tis true, this god did shake ! His coward lips did from their color fly ;
and that same eye, whose bend doth awe the world, did lose his lustre.

"I did hear him *groan* : Ay, and that tongue of his that bade the Romans
mark him, and write his speeches in their books, alas ! it cried, Give me some
drink, Titinius, as a sick girl.'"¹

Singular as this method of illustrating disease may *now* appear, it certainly was impressive at the time, as is evident from the fact that there are those yet in practice on whose minds it is now vividly displayed, and who have notes of the lecture as then delivered.²

In 1884, instruction in the practice of medicine is chiefly clinical and demonstrative during a period of three or four years, whilst the various medical and physiological laboratories give the student a thorough and practical knowledge of medicine aided by instruments of precision, the art being illustrated at the bedside.

Few now graduate from first class medical schools who are not practically instructed in microscopy, auscultation, ophthalmology, etc. In this favorable comparison of the past and present, it is not intended to intimate that a medical education at present is all that it might be. Hygiene, insanity, cerebral and nervous disorders, with medical jurisprudence, are yet barely, if at all, alluded to ; but we may justly recognize the fact that the improvement in medical education now noticeable is largely due to the efforts of our State societies and the action of their delegates in the American Medical Association.

It is, however, very evident that the advocates of a better medical education, in looking to the influence exercised on it by the colleges, have always, and yet overlook the *fons et origo* of the medical student, and the source from which his medical education springs. His first ideas of medicine are generally gained from his office preceptor, and too many physicians have been willing for years to receive as office pupils young men who they were fully aware did not possess the elementary or common school education that should be a preliminary test of their fitness to attend medical lectures.

Let those who now cry out at the imperfections of the medical schools, and the low grade of acquirements they complain of,

¹ Julius Cæsar.

² MS. notes of Professor Chapman's lectures, taken by and now in possession of a former president of this Society.

look first at home. *There* is the root of the evil; the private preceptor is the source of the failure in the grade of medical education. It is not solely in the schools, and I speak from a large experience as a teacher. With the material furnished to the medical classes by each private preceptor, it seems wonderful that our medical colleges have turned out such trained and prominent physicians as now constitute the great body of our profession. Let the rule recently adopted by this Society requiring preceptors to testify to the qualifications of their students when they matriculate, be enforced; let each member of a county society *refuse* to receive, as an office pupil, the lad who is unable to spell or write correctly the English language, and the colleges will readily respond and show that with proper material their work is well done.

The great advances made in chemistry and our increased knowledge of pathology have also greatly changed the treatment of disease and the administration of medicines.

I know that the popular idea is that the regular, scientific practice of medicine has been greatly benefited in this respect by the introduction of Homœopathy; but this is not so. Regularly educated physicians have never been able to have faith in the potency claimed by Homœopathy for a decillionth of a grain of any substance carefully triturated with innocuous sugar of milk. The improvements in practice are certainly very marked in the last fifty years, but they are entirely due to our increased knowledge of the physiology of the healthy body and the demonstration of the self-limited course of diseases that may be watched but cannot be changed. The microscope has also added largely to our knowledge of the changes in the blood and its effect in creating diseased action. Hence we recognize better than was formerly done the necessity of attention to diet and the support of the patient's strength until the poison is eliminated from the blood by the efforts of nature, aided by art. Every year, progress is shown in this direction, and the results of our papers and their discussion in this Society are reaped by the public long after our meetings have adjourned.

The facility of communication by the electric cable, between different parts of the world, also keeps us all better posted than formerly on the novelties and improvements noted in the scientific meetings of European societies, an excellent illustration of which was given in the report of one of our medical journals¹ of the pro-

¹ New York Medical Record.

ceedings of the last meeting of the British Medical Association, which was printed and circulated in the United States within four days from the time of its report in London.

OBLIGATIONS OF THE PUBLIC TO THE PROFESSION.

It seems appropriate to this occasion, when public attention is directed to our annual meeting, to consider the reciprocal obligations of the Public to the Profession.

Our Code of Ethics says:¹ "The benefits accruing to the public directly and indirectly from the active and unwearied beneficence of the profession are so numerous and important, that physicians are justly entitled to the utmost consideration and respect from the community. The public ought likewise to entertain a just appreciation of medical qualifications and discriminate between true science and the assumptions of ignorance and empiricism."

Whilst there are in every community a comparatively few educated persons who admit the correctness of this statement and highly estimate the blessings they derive from scientific medicine, can any one truthfully assert that the public at large thus regards the profession? Does not daily experience demonstrate its indifference to all legislation for medical purposes, even when the object is pre-eminently its own good? Why are we unable to obtain from our Legislature an Act creating a State Board of Health; internal quarantine; compulsory vaccination, and similar laws? Is it evidence of consideration of and respect for the profession to designate the highly educated, accomplished, and scientific physician by a term of derision that originated about fifty years since with a small body who call themselves Homœopaths? Why are we so generally designated as Allopaths that even a Congressional bill contains the name?

The answer usually given is, an Allopath is one who treats disease by large and nauseous doses of medicine, whilst a Homœopath gives little tasteless powders and sugared pellets.

Now nothing is more erroneous as a definition than this statement. The dose of a medicine has nothing whatever to do with the name of Allopath or Homœopath. The distinction between these two schools of medicine is founded on a much more serious difference, which I shall endeavor briefly to explain.

¹ Op. citat., Art. II. § 1.

Homœopathy, from the Greek words *omoio* and *παθεια*, or similarity of feeling or condition, is a term expressive of a doctrine that, after being taught by Paracelsus in 1495,¹ passed into oblivion until revived about the year 1810 by an enthusiastic, mystical,² and erratic German Physician named Hahnemann, who, though apparently governed by good intentions, was practically inexperienced in medicine and badly trained in reasoning: consequently he reached false conclusions by starting on false premises. Assuming and not proving certain statements to be correct, he naturally attained erroneous results. The statement that "like cures like," "similia similibus curantur," was an adoption by him of the words of Paracelsus, though they were never generally proved or accepted as true by the medical profession. Nor has his more original idea of the "potentizing or dynamizing or increased potency doctrine of remedies and their administration in infinitesimal quantities and increased power," been ever accepted by scientific medicine, and is now greatly doubted even by many of his own disciples.

The history of Hahnemann's supposed discovery is thus given by him in his *Organon*.³ "Whilst engaged in translating Cullen's *Materia Medica* he was impressed by the contradictory account given of Peruvian bark, and in experimenting therewith, he found that whilst in the enjoyment of the most robust health he was attacked, after taking freely of this bark, with all the symptoms of intermittent fever, similar in all respects to those which this medicine is known to cure." Being impressed with what he chooses to call "the identity of the two diseases," he immediately announced

¹ Paracelsus, in his *Fragmenta Medica*, Op. Omnia, vol. i. pp. 168, 169, as quoted in the *Encyclopædia Britannica*, has these words:—

"Simile, similis cura; non contrarium.

"Quisquis enim cum laude agere Medicum volet, is has nugas longe valere jubeat. Nec enim ullus unquam morbus calidus per frigida sanatus fuit, nec frigidus per calida. Simile autem sum simile frequenter curavit, scilicet Mercurius, sulphur et Sulphur mercurius, et sal illa velut et illa sal. Interdum quidem cum proprietate junctum frigidum sanavit calidum; sed id non factum est ratione frigidi varum ratione natura alterius quam à primo illo animo diversam facimus."

² "In 1803, when he was forty-eight years old, Hahnemann lived in Dessau, which was his twenty-fourth place of residence in twenty-eight years." Homœopathy, its Doctrines and Practice, by A. B. Palmer, M.D., L.L.D. Detroit, Michigan.

³ *Organon of Homœopathic Medicine*. Philadelphia, 1836; preface to British edition, p. iv.

the aphorism that is the basis of all Homœopathic practice, that "like cures like," "*similia similibus curantur*." At present, when the use of quinine is so common that it is taken without medical advice, it is easy for any one to repeat this experiment and see if, as Hahnemann stated, it will produce "sickness of stomach, loss of appetite, or a sense of cold along the spine, rigors, shivering, and heat of skin, followed by perspiration." Scientific experiments made this year (1884) in Paris by Prof. Germain Sée and his assistant, Dr. Bochefontaine, on the physiological action of quinine, disprove this statement and show that "in the healthy state, sulphate of quinine only lowers the temperature to a very insignificant degree, and does *not* produce a marked diminution of it."¹

The incorrectness of Hahnemann's reasoning seems also to have been recognized soon after he published his book, as his own government forbade his dispensing his medicines and he was obliged to leave Leipsic, where he then resided. He settled in Paris in 1835, and when I saw him there in 1839, scientific medicine ignored him, after proving, as Andral and Esquirol² did, by experiments reported to the French Academy of Medicine, that many remedies did not have the influence he claimed for them in infinitesimal doses. Hahnemann died in 1843, and no monument has yet attested any high estimate of his efforts as a medical teacher.

Another precept of homœopathy involves the belief in the theory of the "increased power of a drug by its attrition or dilution, its trituration being supposed to bring out the spiritual power that exists in the inner structure of the medicine; or, as the pathogenetic power of a drug is supposed to create disease, its trituration gives it greater dynamic or spiritual power."

Hence most articles employed as homœopathic remedies are rubbed up by their apothecaries a great number of times with the hard and harmless substance known as sugar of milk.

¹ Journ. Med. Association, vol. ii. No. IX. March 1, 1884.

² Dr. Oliver Wendell Holmes in 1842, in his "Lecture on Homœopathy and its Kindred Delusions," makes the following reference to Andral's experiments. "The experiments of Andral were made on 140 cases of varied disorders, recorded with great fairness and accuracy; the medicine being obtained from a well-known and reliable homœopathic pharmacist. He experimented with cinchona, aconite, mercury, bryonia, and belladonna. Aconite, he says, was administered in more than 40 cases of feverish symptoms, in which, according to Hahnemann, it exerts so much power, and in not one case did it prove to have the slightest influence, the pulse and heat remaining as before."

In the case of liquid preparations, Hahnemann asserted¹ "that if two drops of a mixture of equal parts of alcohol and the recent juice of any medicinal plant be diluted with 98 drops of alcohol in a vial capable of holding 130 drops, and the whole *twice* shaken together, the medicine becomes exalted in energy to the first development of power, or, as it may be denominated, the first potency. This process is to be continued through 29 additional vials each of equal capacity with the first, and each containing 99 drops of spirits of wine; so that each successive vial after the first, being furnished with one drop from the vial or dilution immediately preceding (which has been twice shaken), is, in its turn, to be shaken twice, remembering to number the dilution upon the cork as the operation proceeds. These manipulations are to be thus conducted through all the vials from the first up to the thirtieth or decillionth development of power, which is the one in most general use." Hahnemann even went further, and thought diseases could be treated by "olfaction," and that a patient, even when he had lost the sense of smell, could yet be cured² by snuffing at the bottle.

Now these directions, which are quoted from his *Organon*, are sufficiently minute to show how much value Homœopathy ascribes to them, and I am informed that this course of trituration and dilution is now daily practised by Homœopathic apothecaries in this and other cities, and that such remedies are implicitly confided in by those who believe in the Homœopathic treatment of disease. As it is easy to recognize the fallaciousness of Hahnemann's statements of the increased power of drugs when thus manipulated,³ we can readily understand why all educated scientific physicians reprobate such doctrines and refuse to degrade their minds by pretending to agree in sentiment with those who assume them to be correct; and the opposition of the old school physicians to the dogma of Homœopathy has then I claim a rational and scientific basis, and is in no way due to professional rivalry. In Europe, Homœopathy is said⁴ "to have no scientific recognition, and the system has no place in any of the German universities; nor has it a school of its own in the German Empire," an empire remarkable for its intelligence. Each year the progress of science also disproves the correctness of some Homœo-

¹ Op. citat., p. 300.

² *Organon*, translation, sec. 20.

³ Simpson, of Edinburgh, makes the 30th attenuation equal to "one grain in an ocean of 14 septillion cubic miles of alcohol."

⁴ *Encyclopædia Britannica*.

pathic doctrine. Thus, Hahnemann asserted that "the causes of disease were impalpable, immaterial, spiritual, dynamic forces," but Tyndale, Pasteur, Koch, and many other scientists have shown the material, *visible* character of disease-germs. The progress of science and sound medical education is also apparent in the changes of opinion now observable in the Homœopathic ranks. In the late meeting of the Homœopathic Medical Society of the State of New York, a warm discussion ensued on the report of a committee "to test the efficacy of high potencies," and one speaker boldly stated "his disbelief in high potencies acting Homœopathically." Others claimed the right to prescribe according to the lights of their own consciences. Hence they are willing to drop the title of Homœopath, and the Homœopathic Medical Journal of New York is now published as the New York Medical Times; so we may reasonably expect to see the day when this egregious folly will be returned to the oblivion from which Hahnemann so injudiciously raised it.

In reviewing the progress of the medical art, it is very evident that as yet Homœopathy has presented us with little that can be regarded as scientific medicine, though it has increased our confidence in the "*vis medicatrix naturæ*," or masterly inactivity, in some cases. Most of the great medical discoveries that have benefited mankind have been made by the regular old school of medicine. The discovery of the circulation of the blood by Harvey, of vaccination by Jenner, of auscultation and percussion by Laennec, of ether by Morton, of chloroform by Simpson, of disease-germs by Pasteur and Koch, are but a few that time permits me to enumerate; whilst Homœopathy has done little but offer us a doubtful Therapeutics, and an incorrect Materia Medica. For nearly all that is truly useful and scientific, Homœopathy is indebted to the works of old school physicians, whose widespread scientific attainments they have presumed to designate as Allopathic ideas. Homœopaths, however, have not hesitated to adopt our remedies and to administer them in full doses, as is shown in the price lists of their principal druggists; whilst the Homœopathic Pharmacopœia was recently so palpably pirated from those of our own distinguished writers in the National and United States Dispensatories, that in order to escape the penalty of an infringement of "copyright" the publishers quickly yielded to legal advice and destroyed the entire edition.¹

¹ In a notice of the Homœopathic Pharmacopœia, "New Remedies," December, 1882, says, "The origin, synonyms, physical properties, and tests for

The term *Allopathy* (αλλοιος and παθος), diverse feeling or conditions, designates "a system of medicine in which the cure of diseases is attempted by creating a condition of the system different from and opposite to or inconsistent with the condition essential to disease."¹ I need hardly say that such a system of medicine is not and has never been the basis of the teaching of any regular medical school, and that the scientific practice of medicine is not *limited* to any such idea. A regularly educated physician, like the members of this and similar societies, is not an allopath any more than he is a homœopath or an antipath; and it is the duty of every member of our body to *reject* and *deny* the correctness of such a title when it is mentioned, and not permit it to be applied to him individually without explaining its erroneous application.

If, as Dr. Oliver Wendell Holmes has said,² "the regular old school physician must have a Greek name of this pattern, call him a *Pantopath*, as his simple doctrine is to employ *any* and *every* remedy or agency which experience shows to be useful in the treatment of disease. Any remedy that can make a decent show for itself is sure of a trial at his hands." The old school physician does not hesitate to employ the wet pack of hydropathy or the galvanic current of electropathy, or the pillules popularly supposed to belong to homœopathy. He is not restricted in his treatment of disease by any such dogma as "*contraria contrariis eurantur*" or the reverse. He does not attempt to relieve a fever by creating a chill; but he does diminish unnatural heat by its natural opponent cold; he relieves thirst by drink; hunger by food; morbid vigilance or wakefulness, by sleep; but he accomplishes this, as has been well said by one of our widely known medical writers,³ by "recognizing the fact that the therapeutical action of a medicine is the physiological antagonist of diseased action."

In fever the scientific physician regards the heat only as a symptom, and that its presence indicates increased oxidation of tissue, and not the cause of the combustion; that thirst is often the

purity are all given with considerable detail; but a comparison with the text of the Dispensatory of Stillé and Maisch shows that "much of the matter of this nature has been copied from the latter work." The number of "New Remedies" for June, 1883, also speaks of the violation of "copyright."

¹ Imperial Dictionary.

² The Human Body and its Management.

³ Prof. Bartholow, of Philadelphia.

result of gastric irritation or deficient secretions ; and he resorts to the proper means of modifying these disordered actions of healthy organs and tissues. It is not then indifference to human life or suffering on the part of our profession, as has been basely asserted by some ignorant people, that separates the old school physician from the homœopathic, eclectic, or other pretentious systems of medicine, and prevents consultations with them ; but it is a conscientious belief in the correctness of the teachings of a school of medicine that is more than twenty-five hundred years old ; is based on the uniform structure of the man of the present day with him who aided in building the pyramids, and that the same muscles that carried Julius Cæsar to the Forum, carried our two martyred Presidents to the scenes of their assassination.

The antiquity of the science of medicine and the correctness of many of the doctrines taught and practised in former ages and yet held, are well known to educated men. Thus, Pythagoras explained the philosophy of disease and the action of medicines in the year 529 B. C. Hippocrates taught and practised medicine at Rome 400 years B. C. Avicenna, an Arabian physician, wrote a system of medicine about the year 980. Harvey, the discoverer of the circulation of the blood, taught medicine in 1628 ; whilst Sydenham, Malpighi, Boerhaave, Hliester, Hunter, Astley Cooper, Benjamin Rush, Chapman, Wood, and a host of worthies, contributed their knowledge and experience to those who at this time justly pride themselves as belonging to the old school, because they revere tradition in medicine as in religion, and recognize the labors and experience of those who preceded them in the study and treatment of disease.

Every man possessed of worthy ancestors is proud of his origin, and venerates the sentiments of honor and virtue they have transmitted to him, and the regular physician of this day dates his ancestors back to the earliest records of our race ; or to the day when Homer, in his lays of the Trojan War, described Machaias and Podalirius as

“ Wise physicians skilled our wounds to heal,
And more than armies to the public weal.”

Scepticism in medicine, as in religion, has always existed, and that of the present time is nothing new.

In fact we daily recognize that in medicine as in other things “ there is nothing new under the sun,” the present organization of

our profession being as old as the time of Nero, whose body-physicians in Rome were designated as *Archiatri*, and corresponded with the present Court-physicians of Europe. In the time of Antoninus Pius, A. D. 120 (as in 1884), doctors were classified according to their practice, as physicians (*medici*), surgeons (*chirurgii*), and oculists (*ocularii*); besides whom, there were aurists; Lady physicians, whom some of the 19th century captiously and coarsely designate as Women or even petticoat doctors, regarding them as a new and doubtful departure. There were also assistants, or rubbers, now called Massage, whilst many other practices now employed as the so-called improvements of this conceited age were in general use in the time of the Empress Livia, the wife of Augustus.¹ Possibly, as the history of the domestic lives of the Greeks and Romans becomes better known, *we* may also find Specialists such as then existed, some confining themselves to the treatment of the uvula; or the eyelashes and eyebrows; or the nails, or corns; whilst others, as in Rome, will restrict their practice to the treatment of old men, and others treat only the strong and robust. In Rome, some were cured only with herbs, and others by means of gymnastic exercises, now designated as the Swedish movement cure. With all these varied appliances ready to our hands, and constantly employed for centuries in the varied treatment of disease, can we be justly called *Allopaths*, or be supposed to be limited in our treatment to the theory of "*contraria, contrariis curantur*?"

I hope I have thus shown the distinction between Allopathy and Homœopathy, and that scientific medicine, whilst assigning to each theory its true value, belongs to neither. Whether a knowledge of these facts will modify the public estimate of our profession, or induce Congress to omit the word Allopath from the Senate bill 1223 for the employment of different schools of medicine in the government service, remains to be seen. We all know the "unreasonableness of most popular ideas on any subject, and how closely they need to be examined by educated reason before they can be safely recognized as correct." In trifling disorders, it matters little what form the popular medical belief may take; whether it trusts to Homœopathy, Hydropathy, or any other pathy; but in the serious diseases that threaten life, it is important that the experienced investigations of science as to cause and effect should

¹ Lives of the Greeks and Romans, by Guhl & Korr, p. 527 *et seq.*, and Pliny, Natural History, Book 29.

be sought, if life is to be preserved. An injudicious treatment, even when apparently simple and expectant, may do harm by allowing the moment to pass when the active and judicious assistance of nature can be safely given.

As our Code directs us to be ever vigilant of the welfare of the community, and to give counsel on matters specially pertaining to our profession, I have thus imperfectly alluded to a very common error, the results of which may be briefly summarised as having shortened life and lengthened suffering. I trust, however, that in referring to the unscientific character of Homœopathy as a medical doctrine, I may not realize the correctness of the statement of Macdonald in one of his essays,¹ "that many forms of error, perhaps most, are better let alone, to die of their own weakness, as the galvanic battery of criticism only helps to perpetuate their ghastly life."

That our profession has always been ready (as the same clause of the Code directs²) not only to watch over the public welfare, but also to face danger and labor for the alleviation of suffering, even at the jeopardy of their own lives, has been over and over again illustrated in all epidemics of smallpox, diphtheria, typhus fever, etc. I wish, however, to ask your further indulgence whilst I cite one instance of professional heroism under extraordinary circumstances, as it demonstrates the admirable traits of a surgeon's duty, and is not as widely known as it deserves to be to his professional brethren, or to the citizens of the town in which he was born and now lives.

During the rebellion in 1862, when the rebel ram Merrimac unexpectedly attacked our old wooden frigates anchored in Hampton Roads, near Fortress Monroe, there were on board the Congress her full complement of officers and men, and the surgeon had only the ordinary daily duty of prescribing in a "sick-bay," badly lighted below the gun-deck. When, however, the rebel ram came down from Newport News, and, after ramming and sinking the Cumberland, came at the comparatively helpless Congress (whose guns could make no impression on an iron-clad), and fired a shell, which, entering a port-hole, at once either killed or wounded every one of

¹ Essays by George Macdonald, reviewing some of the Forms of Literature, by T. T. Lynch, p. 219.

² Code of Ethics, Art. I. § 1, Duties of the Profession to the Public.

that gun's crew, and slaughtered great numbers of men at other guns, the scene was instantly changed.

Now came the horrors of that hour as simply described by the surgeon of the Congress, who then had not only to operate and dress the crowd of wounded men thus suddenly thrust upon him, but had it to do under scenes of danger and excitement that might well appal the bravest officer. In describing his position at this time, he says:¹ "Our clean and handsome gun-deck was, in an instant, transformed into a slaughter-pen, with lopped-off legs and arms, and bleeding blackened bodies, scattered about by the bursting shells: whilst the blood and brains of the men actually dropped from the beams above us." To add to the horrors of the scene, amidst the smoke of battle and the crash of heavy shot, it was soon discovered that the ship was on fire in the sick-bay, and under the ward-room magazine, opened and at that time full of ammunition, that was liable at any moment to explode and blow all hands into eternity. In order to keep down the fire, which was below, the firemen had next to carry the hose through the hospital; and to add, if possible, to the horrors of the hour, the wounded men lying on the floor of the "cock-pit" were sluiced with icy cold water from the pumps worked to extinguish the fire, and prevent its extension to the magazine. Men with axes and hosemen were also now engaged in battering down and cutting away the bulkheads around the "sick-bay" to permit the water to enter.

During all this turmoil and danger, where was the surgeon? Did *he* continue at his post and strive to alleviate suffering, even when a wounded man, about to be operated on, was instantly killed by a shell tearing through the "sick-bay?" Indeed he did, and with his able assistant surgeons illustrated not only their courage as naval officers, but also the humanity and benevolence of a noble profession.

Writing subsequently of his further experience in the attack on Fort Fisher (an admirable delineation of which, by a fellow-citizen, you have seen in the collection of the Academy of Fine Arts),² this surgeon never alludes for a moment to his own danger or exposure under fire, but simply says, in his description of the scenes, "Perhaps I have dwelt too much on such horrors, but they made a great

¹ United Service Magazine, vol. iv. p. 53, "Pictures of Two Battles," by Edward Shippen, M D., U. S. N., Medical Director (Philadelphia).

² By Zanthus Smith, of Philadelphia.

impression on me." Who can doubt that they did, or fail to recognize that—

"'Twas then [a] mighty soul was proved,
That in the shock of charging hosts, unmoved,
Amidst confusion, horror, and despair,
Examined all the dreadful scenes of War" ?

If our brother surgeon is accidentally present, I trust he will accept as his just due this tribute from an old friend, who reached the scene shortly after the fight and heard the incidents discussed by many.

Gentlemen of the Society :—

I have, perhaps, detained you too long from pleasanter engagements in thus alluding to topics known to many of you ; but in doing so, I have endeavored to illustrate " the importance and usefulness of scientific medical organizations to our profession and the public."

If I have failed in this, I trust you will recognize the difficulty of properly discussing this subject in the portion of time justly allotted me. I have, as you will notice, abstained from reference to the progress of medical science during the past year, though it might have proved more attractive, as this subject will be ably presented by other members of our Society.

Permit me before closing to acknowledge my appreciation of the attention accorded me on this occasion, and to express the hope that the present session of the Society will promote not only the hygienic interests of the Keystone State, but also those of other communities.

Addison : "The Campaign " of Marlborough at Blenheim.

